

ORDER FOR SUPPLIES OR SERVICES										PAGE 1 OF 5		
1. CONTRACT PURCH ORDER/AGREEMENT NO. <div style="border: 1px solid black; padding: 2px;">DAAE20-03-A-0038</div>			2. DELIVERY ORDER/CALL NO. <div style="border: 1px solid black; padding: 2px;">0002</div>		3. DATE OF ORDER/CALL (YYYYMMDD) <div style="border: 1px solid black; padding: 2px;">2004MAY25</div>		4. REQUISITION/PURCH REQUEST NO. <div style="border: 1px solid black; padding: 2px;">SEE SCHEDULE</div>		5. PRIORITY <div style="border: 1px solid black; padding: 2px;">DXA5</div>			
6. ISSUED BY TACOM-ROCK ISLAND AMSTA-LC-CAC-C IRENE MAWSON (309)782-3810 ROCK ISLAND IL 61299-7630 EMAIL: MAWSONI@RIA.ARMY.MIL			CODE <div style="border: 1px solid black; padding: 2px;">W52H09</div>		7. ADMINISTERED BY (If other than 6) DCMA NEW YORK FT WADSWORTH BLDG 120 207 NEW YORK AVE STATEN ISLAND NY 10305-5013 SCD: A PAS: NONE ADP PT: HQ0337			CODE <div style="border: 1px solid black; padding: 2px;">S3310A</div>		8. DELIVERY FOB <input checked="" type="checkbox"/> DESTINATION <input type="checkbox"/> OTHER (See Schedule if other)		
9. CONTRACTOR E A W ELECTRONIC SYSTEMS INC 145 PALISADE STREET, SUITE 318 DOBBS FERRY, NY. 10522-1626 NAME AND ADDRESS TYPE BUSINESS: Other Small Business Performing in U.S.			CODE <div style="border: 1px solid black; padding: 2px;">OMAK6</div>		FACILITY <div style="border: 1px solid black; padding: 2px;"></div>		10. DELIVER TO FOB POINT BY (Date) (YYYYMMDD) SEE SCHEDULE			11. X IF BUSINESS IS <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input checked="" type="checkbox"/> WOMAN-OWNED		
12. DISCOUNT TERMS			13. MAIL INVOICES TO THE ADDRESS IN BLOCK See Block 15									
14. SHIP TO SEE SCHEDULE			CODE <div style="border: 1px solid black; padding: 2px;"></div>		15. PAYMENT WILL BE MADE BY DFAS COLUMBUS CENTER NORTH ENTITLEMENT OPERATIONS PO BOX 182266 COLUMBUS OH 43218-2266				CODE <div style="border: 1px solid black; padding: 2px;">HQ0337</div>		MARK ALL PACKAGES AND PAPERS WITH IDENTIFICATION NUMBERS IN BLOCKS 1 AND 2	
16. TYPE OF ORDER <div style="display: flex; justify-content: space-between;"> <div style="width: 15%;">DELIVERY/ CALL</div> <div style="width: 10%; text-align: center;">X</div> <div style="width: 75%;">THIS DELIVERY ORDER IS ISSUED ON ANOTHER GOVERNMENT AGENCY OR IN ACCORDANCE WITH AND SUBJECT TO TERMS AND CONDITIONS OF ABOVE NUMBERED CONTRACT.</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 15%;">PURCHASE</div> <div style="width: 85%;"> Reference your <input type="checkbox"/> Oral <input type="checkbox"/> Written Quotation _____, Dated _____. furnish the following on terms specified herein. ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME. </div> </div>												
<div style="display: flex; justify-content: space-between; margin-bottom: 5px;"> <div style="width: 30%;">NAME OF CONTRACTOR</div> <div style="width: 30%;">SIGNATURE</div> <div style="width: 30%;">TYPED NAME AND TITLE</div> <div style="width: 10%;">DATE SIGNED (YYYYMMDD)</div> </div> <input type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies:												
17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE SEE SCHEDULE												
18. ITEM NO.		19. SCHEDULE OF SUPPLIES/SERVICE			20. QUANTITY ORDERED/ ACCEPTED*		21. UNIT	22. UNIT PRICE		23. AMOUNT		
		SEE SCHEDULE CONTRACT TYPE: Firm-Fixed-Price KIND OF CONTRACT: Supply Contracts and Priced Orders										
* If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.					24. UNITED STATES OF AMERICA CAROL C RIVARD /SIGNED/ RIVARDC@RIA.ARMY.MIL (309)782-3272 BY: _____ CONTRACTING/ORDERING OFFICER					25. TOTAL \$38,858.96		
27a. QUANTITY IN COLUMN 20 HAS BEEN <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO CONTRACT EXCEPT AS NOTED _____												
b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE					c. DATE (YYYYMMDD)		d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE					
e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE					28. SHIP. NO.		29. D.O. VOUCHER NO.		30. INITIALS			
f. TELEPHONE NUMBER					g. E-MAIL ADDRESS					31. PAYMENT <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		
36. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT.					32. PAID BY		33. AMOUNT VERIFIED CORRECT FOR					
a. DATE (YYYYMMDD)					b. SIGNATURE AND TITLE OF CERTIFYING OFFICER					34. CHECK NUMBER		
					<input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		35. BILL OF LADING NO.					
37. RECEIVED AT		38. RECEIVED BY (Print)		39. DATE RECEIVED (YYYYMMDD)		40. TOTAL CONTAINERS		41. S/R ACCOUNT NUMBER		42. S/R VOUCHER NO.		

CONTINUATION SHEET	Reference No. of Document Being Continued		Page 2 of 5
	PIIN/SIIN DAAE20-03-A-0038/0002	MOD/AMD	
Name of Offeror or Contractor: E A W ELECTRONIC SYSTEMS INC			

SUPPLEMENTAL INFORMATION

1. THE PURPOSE OF THIS ORDER IS TO AWARD 92 EACH CIRCUIT CARD ASSEMBLIES, NSN: 5998-01-063-6380, P/N: SM-D-804966.
2. THE DELIVERY SCHEDULE IS IN SECTION B.
3. DUE TO RECENT INCREASES IN WORKLOAD, SHIPMENTS TO DEFENSE DEPOT SUSQUEHANNA PENNSYLVANIA, (DDSP)(NEW CUMBERLAND) ARE EXPERIENNCING PROBLEMS RECEIVING CONTRACT DELIVERIES. TO AVOID DELIVERY DELAYS, ALL DELIVERIES SCHEDULED FOR DDSP (NEW CUMBERLAND) NOW REQUIRE AN APPOINTMENT. CONTRACTORS ARE REQUIRED TO SCHEDULE DELIVERY APPOINTMENTS BY CALLING DDSP CUSTOMER SERVICE HOTLINE 10 DAYS PRIOR TO DELIVERY DATE. THE DDSP CUSTOMER SERVICE NUMBER IS 1-800-307-8496. APPOINTMENTS FOR FOB ORIGIN SHIPMENTS SHOULD BE COORDINATED WITH DCMA TRANSPORTATION. THE FOLLOWING INFORMATION WILL BE REQUIRED:
- A. CONTRACT NUMBER
 - B. ITEM NAME (NOUN)
 - C. NSN
 - D. TOTAL WEIGHT AND CUBE
 - E. VENDOR
 - F. IDENTIFICATION OF CONSOLIDATION AND CONTAINERIZATION POINT (CCP) STOCK OR MISSION STOCK

ITEM F MAY BE OBTAINED BY CALLING THE CONTRACT SPECIALIST, IRENE MAWSON (309) 782-3810 OR THE ITEM MANAGER, DIANE MAYHALL (309) 782-6765.

PLEASE CONTACT THE CONTRACT SPECIALIST FOR ASSISTANCE REGARDING PROBLEMS MAKING APPOINTMENTS

4. ALL OTHER TERMS AND CONDITIONS OF THE BPA REMAIN UNCHANGED.

*** END OF NARRATIVE A 001 ***

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
	SUPPLIES OR SERVICES AND PRICES/COSTS				
0001	NSN: 5998-01-063-6380 FSCM: 80063 PART NR: SM-D-804966 SECURITY CLASS: Unclassified				
0001AA	<u>PRODUCTION QUANTITY</u> NOUN: CIRCUIT CARD ASSEMB PRON: M121A142M1 PRON AMD: 05 ACRN: AA AMS CD: 070011 <u>Packaging and Marking</u> <u>Inspection and Acceptance</u> INSPECTION: Origin ACCEPTANCE: Origin <u>Deliveries or Performance</u> DOC SUPPL <u>REL_CD</u> <u>MILSTRIP</u> <u>ADDR</u> <u>SIG_CD</u> <u>MARK FOR</u> <u>TP_CD</u> 001 W52H092014H609 W25G1U J 2 <u>DEL_REL_CD</u> <u>QUANTITY</u> <u>DEL_DATE</u> 001 77 30-SEP-2004 FOB POINT: Destination SHIP TO: <u>PARCEL POST ADDRESS</u> (W25G1U) XU TRANSPORTATION OFFICER DDSP NEW CUMBERLAND FACILITY BUILDING MISSION DOOR 113 134 NEW CUMBERLAND PA 17070-5001 <u>CONTRACT/DELIVERY ORDER NUMBER</u> DAAE20-03-A-0038/0002 DOC SUPPL <u>REL_CD</u> <u>MILSTRIP</u> <u>ADDR</u> <u>SIG_CD</u> <u>MARK FOR</u> <u>TP_CD</u> 002 W52H092014H610 W62G2T J 2 <u>DEL_REL_CD</u> <u>QUANTITY</u> <u>DEL_DATE</u> 001 15 30-SEP-2004 FOB POINT: Destination SHIP TO: <u>PARCEL POST ADDRESS</u> (W62G2T) XU DEF DIST DEPOT SAN JOAQUIN TRANSPORTATION OFFICER PO BOX 960001 STOCKTON CA 95296-0130 <u>CONTRACT/DELIVERY ORDER NUMBER</u>	92	EA	\$ 422.38000	\$ 38,858.96

Name of Offeror or Contractor: E A W ELECTRONIC SYSTEMS INC

ITEM NO	SUPPLIES/SERVICES	QUANTITY	UNIT	UNIT PRICE	AMOUNT
	DAAE20-03-A-0038/0002				

CONTRACT ADMINISTRATION DATA

PRON/										JOB					
LINE	AMS	CD/	OBLG							ORDER	ACCOUNTING		OBLIGATED		
<u>ITEM</u>	<u>MIPR</u>	<u>ACRN</u>	<u>STAT</u>	<u>ACCOUNTING CLASSIFICATION</u>					<u>NUMBER</u>	<u>STATION</u>		<u>AMOUNT</u>			
0001AA	M121A142M1	AA	2	97	X4930AC6G	6D	26FB	S11116		W52H09	\$	38,858.96			
	070011														
											TOTAL	\$	38,858.96		
SERVICE										ACCOUNTING		OBLIGATED			
<u>NAME</u>	<u>TOTAL BY ACRN</u>		<u>ACCOUNTING CLASSIFICATION</u>							<u>STATION</u>		<u>AMOUNT</u>			
Army	AA		97	X4930AC6G	6D	26FB	S11116			W52H09	\$	38,858.96			
											TOTAL	\$	38,858.96		